

CLAIMS ONLY

Application Number

" Filling" Date

09/682,314

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED 4/18/19		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	/					
2		/				
3		/				
4		/				
5		/				
6		/				
7		/				
8	/	/				
9	/	/				
10		/				
11		/				
12		/				
13		/				
14		/				
15	/					
16		/				
17		/				
18	/	/				
19	/	/				
20		/				
21		/				
22	/	/				
23		/				
24		/				
25		/				
26		/				
27		/				
28		/				
29	/	/				
30	/	/				
31	/	/				
32		/				
33		/				
34		/				
35		/				
36		/				
37		/				
38	/	/				
39	/	/				
40	/	/				
41		/				
42		/				
43		/				
44	/	/				
45		/				
46	/					
47		/				
48		/				
49		/				
50		/				
Total Indep						
Total Depend.						
Total Claims						

may be used for additional claims or amendments						
CLAIMS	AFTER THIRD AMENDMENT		AFTER FOURTH AMENDMENT		AFTER FIFTH AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
51		/				
52		/				
53	/	/				
54	/	/				
55		/				
56		/				
57		/				
58		/				
59		/				
60	/	/				
61		/				
62		/				
63	/	/				
64	/	/				
65		/				
66		/				
67		/				
68	/	/				
69	/	/				
70	/	/				
71		/				
72		/				
73		/				
74		/				
75		/				
76		/				
77	/	/				
78	/	/				
79		/				
80	/	/				
81		/				
82		/				
83		/				
84		/				
85	/	/				
86	/	/				
87		/				
88		/				
89		/				
90		/				
91		/				
92		/				
93	/	/				
94		/				
95		/				
96		/				
97		/				
98		/				
99		/				
100		/				
Total Indep						
Total Depend						
Total Claims						